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| ω                                                                                                                                                                                                                                                                                                         | S&H Form: PTO/SB/05 (2/01)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |
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| UTILITY                                                                                                                                                                                                                                                                                                   | Afterney Docket No. 122 1477                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |
| UTILITY PATENT APPLICATION TRANSMITTAL                                                                                                                                                                                                                                                                    | First Named Inventor or Application Identifier: Hideki ISOHATA, et al.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |
| TRANSMITTAL TRANSMITTAL                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| (Only for original applications)                                                                                                                                                                                                                                                                          | Express Mail Label No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.                                                                                                                                                                                                                 | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |
| 1. 🛛 🗼 Fee Transmittal Form                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 2. Specification, Claims & Abstract[Total Pages:_                                                                                                                                                                                                                                                         | <u>16</u> ]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |
| 3. Drawing(s) (35 USC 113)[ Total Sheets:_                                                                                                                                                                                                                                                                | 7_] [FIGS. <u>1-13</u> ]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
| 4. ☑ Oath or Declaration                                                                                                                                                                                                                                                                                  | 4 ]<br>(d))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |
| 5.  Verified Statement Claiming Small Entity Status                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 6. Application Data Sheet. See 37 C.F.R. 1.76                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 7. CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix)                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| <ul> <li>8.  Nucleotide and/or Amino Acid Sequence Submissional</li> <li>a.  Computer Readable Form (CRF)</li> <li>b.  Specification Sequence Listing on: <ol> <li>i.  CD-ROM or CD-R (2 copies); or</li> <li>II.  paper</li> <li>c.  Statement verifying identity of above copies</li> </ol> </li> </ul> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| ACCOMPANYING APPLICATION PARTS                                                                                                                                                                                                                                                                            | THE STATE OF THE S |  |  |  |  |
|                                                                                                                                                                                                                                                                                                           | U HITACHI PLASMA DISPLAY LIMITED of Kawasaki, Japan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |
| for publication of assignee information under 37                                                                                                                                                                                                                                                          | · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |
| 10. 37 CFR 3.73(b) Statement (when there is an assigned                                                                                                                                                                                                                                                   | e) Dower of Attorney                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| 11. English Translation Document (if applicable)                                                                                                                                                                                                                                                          | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |
| 12. Information Disclosure Statement (IDS)/PTO-1449                                                                                                                                                                                                                                                       | ☐ Copies of IDS Citations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |
| 13. Preliminary Amendment                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 14. Return Receipt Postcard (MPEP 503) (Should be spe                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 15. Certified Copy of Priority Document(s) (if foreign prior                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 16. Request and Certification for Nonpublication under 38                                                                                                                                                                                                                                                 | 5 U.S.C. 122(b)(2)(B)(i). Applicant must attach form                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| PTO/SB/35 or its equivalent                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 17.  Other:                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 18. CORRESPONDENCE ADDRESS                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| 21171                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| PATENT TRADE                                                                                                                                                                                                                                                                                              | MARK OFFICE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |

S&H Form (2/01)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                     |                                  |             |                        |                      | S&H Form (2/01)           |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------|-------------|------------------------|----------------------|---------------------------|--|
| NEW APPLICATION<br>FEE TRANSMITTAL                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                  | Attorney                                            |                                  |             | 12                     | 122.1477             |                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  | Applicat                                            |                                  | mber        |                        |                      |                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                     |                                  |             |                        | vember 29, 2001      |                           |  |
| AMOUNT ENCLOSED \$ 972.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                  | First Na                                            | med In                           | ventor      | Hie                    | deki ISOHATA, et al. |                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | LATION (fees effective                                                           | ve 10/01/00)                                        |                                  |             |                        |                      |                           |  |
| CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (1) FOR                                                                          | (2) NUMBER<br>FILED                                 | (3) NUMBER (4) RATE<br>EXTRA     |             |                        | (5) CALCULATIONS     |                           |  |
| ***                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | TOTAL CLAIMS                                                                     | 26 - 20 =                                           | 6                                |             | X \$<br>18.00 =        |                      | \$ 108.00                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | INDEPENDENT<br>CLAIMS                                                            | 4 - 3 =                                             | 1                                |             | X \$<br>84.00 =        |                      | 84.00                     |  |
| 10 - 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | MULTIPLE DEPEN if applicable)                                                    | DENT CLAIMS                                         | T CLAIMS (any number; + \$280.00 |             |                        |                      |                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | III dobilodolo /                                                                 | >>                                                  | 4 ,                              | BASI<br>FEE | C FILING               |                      | 740.00                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 0 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3                                          |                                                     | * ***                            | Total       | of above               |                      | \$ 932.00                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Surcharge for late 1 1.53(f)) (\$130.00)                                         |                                                     |                                  | ion (37     | CFR                    |                      |                           |  |
| 5 × 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Reduction by 50%                                                                 | for filing by smal                                  | l entity (3                      |             |                        |                      |                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | , , ,                                                                            | 3 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1             | *e>                              | FEE:        |                        | }                    | \$ 932.00                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Surcharge for filing non-English language application (\$130.00; 37 CFR 1.52(d)) |                                                     |                                  |             |                        |                      |                           |  |
| lui Caralle a 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Recordation of Ass                                                               | Recordation of Assignment (\$40.00; 37 CFR 1.21(h)) |                                  |             |                        |                      | 40.00                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  | TOTAL FEES DUE =                                    |                                  |             |                        |                      | \$ 972.00                 |  |
| METHOD OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | PAYMENT                                                                          |                                                     | .,                               |             |                        |                      |                           |  |
| ☐ Check €                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | enclosed as payment                                                              |                                                     |                                  |             |                        |                      |                           |  |
| Charge "TOTAL FEES DUE" to the Deposit Account No. below.                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                  |                                                     |                                  |             |                        |                      |                           |  |
| No payment is enclosed and no charges to the Deposit Account are authorized at this time (unless specifically required to obtain a filing date).                                                                                                                                                                                                                                                                                                                                              |                                                                                  |                                                     |                                  |             |                        |                      |                           |  |
| GENERAL AUTHORIZATION  If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                  |                                                     |                                  |             |                        |                      |                           |  |
| ☑ If the a authori                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | bove-noted "AMOUN<br>zed to credit any ove                                       | IT ENCLOSED"<br>rpayment or cha                     | is not corr<br>rge any a         | ect, the    | e Commis<br>al fees ne | ssior<br>ces         | ner is hereby<br>sary to: |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Deposit Account No.                                                              | 19-3935                                             |                                  |             |                        |                      |                           |  |
| i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Deposit Account Nar                                                              | me STAAS &                                          | HALSEY                           | LLP         |                        |                      |                           |  |
| The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application. |                                                                                  |                                                     |                                  |             |                        |                      |                           |  |
| SUBMITTED BY: STAAS & HALSEY LLP                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                  |                                                     |                                  |             |                        |                      |                           |  |
| Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | H. J. Staas                                                                      | <u> </u>                                            |                                  |             | Reg. No                | 1                    | 22 010                    |  |
| . ypod rame                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1/1.0.01883                                                                      |                                                     |                                  |             | rteg. 140              | <u>'-  </u>          | 22,010                    |  |
| Signature<br>© 2001 Staas &                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Holoov I I D                                                                     | Skar                                                |                                  |             | Date                   |                      | November 29, 2001         |  |
| e zou i Staas o                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | TIAISEY LLP                                                                      |                                                     |                                  |             |                        |                      |                           |  |

. FA4 ...